Understanding the LONG-TERM EFFECTS of CHILD SEXUAL ABUSE on Men and Their Relationships

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Overview

- Research issues and findings re:
  - Prevalence
  - Disclosure
  - Context, consequences and outcomes

- Gender differences

- Policy and practice implications

- Based on CFCA Paper 11:

  and Gender differences in the context and consequences of child sexual abuse (in press)
Research issues

- Teasing out the 'effects' of child sexual abuse and other adverse experiences in childhood is not straightforward
  - Estimating the prevalence is difficult – unknown ‘dark figure’ of those who never disclose, report
  - Different definitions of child sexual abuse
  - Different samples, methodologies
  - Source of the accounts of abuse and outcomes

Teasing out the effects

- Establishing causation? Criteria …
  - An association between abuse and later functioning
  - Abuse occurs before ‘effects’
  - Association or ‘effect’ is not due to some other extraneous factors eg other adverse circumstances esp family environment and support – can be risk factor, correlate, outcome
  - Conflation – shared method variance
  - A plausible mechanism that can explain the ‘link’
Estimating the prevalence

- **Different definitions of abuse / forms it takes**
  - varying estimates of prevalence and outcomes across studies/countries/time

- Unknown ‘**dark figure**’ of those who never disclose or formally report

- So that will compromise any comparison between:
  - those classified as ‘non-abused’ and
  - those who are ‘known’ to have been abused and reported

General and Specialised Populations

- ‘**General population**’ studies – national representative
  - Smaller and larger scale studies – age range
  - eg retrospective survey reports of ‘unwanted’ sexual experiences before age 14, 16

- **College students** especially US research

- **Clinical** - referred to or seeking medical services, support, and counselling – not identified as reported abuse

- ‘**Officially reported**’ abuse
  - Child victim-witnesses
  - Adult child sexual assault survivors using specialist services
Source of reports and outcomes

- **Contemporaneous** or **retrospective** account of:
  - abuse?
  - ‘effects’?
- Same source of account of abuse and impact?
- Has the abuse been disclosed/reported?
- Official or formal reporting to police and child protection?

Definitions and measures

**Christchurch longitudinal study** – Retrospective 18+ and 21 years

Whether **before the age of 16** -

- **anyone** had ever attempted to involve them in 15 sexual activities
- when they **did not want this to happen**…

3 categories:

- **Non-contact**
- **Contact** – any form of physical contact
- Oral, vaginal or anal penetration
Definitions and measures

- **ACE study** (Adverse Childhood Experiences)
  
  Did an adult or person at least 5 years older than you ever...
  
  - Touch or fondle you or have you touch their body in a sexual way? or
  
  - Attempt or actually have oral, anal, or vaginal intercourse with you? Yes/No: If yes, enter 1


Some instability in response

- **Christchurch longitudinal study** *
  
  Repeated questions at age 18 and 21
  
  - Instability in response – any childhood sexual abuse
  
  - 86% - no CSA at both ages
  
  - 4.7% - CSA at both ages
  
  - 10% said CSA at age 18 but half did not “admit” at age 21
  
  - 3.8% said CSA at age 21 but not at 18
  
  - Not associated with psychiatric state at time of reporting
  
  - Wanting to forget / embarrassment / denial

Research methodologies

- **More rigorous studies** eg large-scale longitudinal designs, twin studies, and data linkage studies
  - Australia – Cutajar et al, 2010; Nelson et al, 2002

- **Meta-analyses** – systematic cross-study measures eg Paolucci et al, 2001; Hillberg et al 2011; reviews of meta-analyses..

Mechanisms – impact of child sexual abuse

- Distortion and abuse of relationships – if known
- Betrayal of trust
- Sexualisation ➔ sexualised behaviours
  - Often misunderstood in court proceedings
- Trauma – stress response – brain development
  - **HPA axis = Hypothalamic – Pituitary - Adrenal**
Distinguishing disclosure and reporting

- Responding to research questions
- Disclosure – Did they tell anyone? At any time?
- Formal / official reporting
  - Who did they tell?
  - When?
  - With what consequences?

Disclosure rates

- Substantial under-reporting of child sexual abuse
  - A greater level of under-reporting for males
- Where child sexual abuse/assault known from official records but not reported in adulthood
- Fallibility of memory and/or
- Desire to forget and/or
- Unwillingness to ‘volunteer’ info
  - Abuse by a family member and abuse at an early age (under 5 years) – both less likely to be reported
Consequences of disclosure and reporting

- **Internal/ Personal aspects**
  - Being believed
  - Shame, responsibility
  - Powerlessness → Threats to child and family (or perceived) and (in)ability to get it to stop
  - Sexual identity

- **External – actions of others**
  - Child protection intervention
  - Church / institutional response
  - Police and possible criminal prosecution?

Gender differences

- **Abuse by clergy**
  - Boys more likely than girls – 75-80% of victims
  - Most common age – 11-14 years
  - Long delay to disclosure – average 25 years
    - John Jay College US – 2004 large-scale study
    - Parkinson, Oates & Jayakody 2010 – Anglican church
Gender differences

- **Mixed results** but ‘under-reported’ sexual abuse of males
- **Prevalence issues** — severity, frequency, duration, relationship to offender, clergy/religious abuse
- Boys and men less likely to disclose and report CSA

**Dynamics of child sexual abuse**
- ‘Real men’ – not ‘victims’ or vulnerable /sexual prowess
- Fear of homosexuality – label and self-label
- Fear of victim-to-offender cycle
- More likely to be seen as instigator?

Main findings: LT “Effects”

- **Range of adverse outcomes** for sexual abuse during childhood, adolescence and adulthood
- **But** abuse is not destiny – not all experience adverse outcomes and timing of onset of difficulties varies
- **Aspects of the abuse** — relationship between the abuser and the child, age and gender of the child, betrayal of trust and manipulation, form of abuse
- **Reactions of others** - family and friends
Consistent findings

- Behavioural and mental health functioning
  - Anxiety, depression and suicidality
  - Alcohol and substance abuse
  - Risky behaviours including sexual behaviours
  - Interpersonal difficulties
    - Trust and intimacy, parenting and risk of re-victimisation
  - Involvement with criminal justice system

- Range of physical health problems – stress-response related?

- Gender differences – greater problems in some areas? Later disclosure and less support for males?

Alcohol and substance dependence

- Life-time alcohol dependence rates
  - For women 16% cf 8% (non-abused) (Molnar, Buka & Kessler 2001)
  - And higher for men – 39% cf 19% (non-abused)

- Explanatory mechanisms – self-medication
  - dampening of hyper-arousal PTSD symptoms

- Interactive additive effects:
  - With parental alcohol problems and other forms of maltreatment, adverse childhood events see Fenton et al (2013) Psychological Medicine
  - Childhood abuse and cannabis use psychosis
    - “Greater than additive interaction” (Harley et al, 2010)
Interactive synergistic effects

Harley et al. (2010)

Cannabis use and childhood trauma interact to increase the risk of psychotic symptoms in adolescence

Risky behaviours

- Increased likelihood of risky/harmful behaviours
  - Especially in adolescence
  - ‘Accidental’ fatal overdoses
  - Gambling
  - Sexual behaviour/activity
    - Early onset consensual activity
    - Multiple partners
    - Unprotected intercourse → STDs, unwanted pregnancies, HIV
Explaining and accounting for association between CSA and risky sexual behaviours:

- Child sexual abuse - severity
- Learned helplessness
- Low self-esteem
- Sexualised behaviours
- Early & risky sexual behaviour in adolescence
- Drug and alcohol use

Interpersonal difficulties

- **Trust and intimacy**
  - Betrayal of trust and personal boundaries
  - Secrecy - confusion, guilt, shame, isolation
- **Parenting** – different for males and females
  - Anxiety and lack of confidence parental stress
  - Other adverse circumstances – isolation, violence
- **Fathering**
  - Anxiety and over-protectiveness
  - Concerns about own possible victim-to-offender pathway
  - But also as a healing experience
Causal chain?
Partnership outcomes at age 30


Child sexual abuse - severity → Low self-esteem → Substance abuse → Early & risky sexual behaviour in adolescence

Inter-partner conflict and violence → Low relationship satisfaction → Earlier and more frequent cohabitation

Re-victimisation

- Sexually abused children and adolescents more likely to be sexually assaulted as adults
  - Teasing out the effects – proximal as well as indirect
- Not just sexual victimisation
- Likely mechanisms / mediators
  - Self-esteem
  - Discrimination and trust
  - Hyper-arousal – distinguishing actual/false alarms
Involvement with criminal justice system

- **Victim-to-offender cycle – stigma and fear**
  - Research indicates an increased risk but the vast majority of sexually abused children do not go on to offend
  - Different types of studies and population base
  - Depends on starting point / population of analysis
- **Starting with CSA children …**
- **Starting with offenders / prison / JJ detention …**

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Start with adults, adolescents in detention

- High proportion with history of maltreatment and social disadvantages and adverse childhood experiences
- Overall average – studies 41% – 43%
  - 39% of females and 5% males – self-report CSA
  - 55% of females and 24% males – high psychological distress
  - 45% males – committed sexual offence
Involvement with criminal justice system

- Starting with children who have been sexually abused
  - Greater likelihood of
    - Behaviour problems
    - Running away survival crimes eg prostitution, stealing, drug offences
    - Juvenile offending
  - Sexual offending - mixed results but more likely if abused as an adolescent ie 12 years plus
  - Type of study important – follow-up
    - Sexual offending by males – 9% if 12+ years cf 3% (under 12) cf comparison group 1% overall

Table/Fig 6.7.2  Any childhood abuse or neglect (scores above 'none to low')

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<td>56.8</td>
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<tr>
<td>Young Women</td>
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Main messages – what do we know?

- Complex picture – multiply determined
  ‘multiple pathways’ ➔ multiple problems
- Interactive synergistic relationships – “more than additive”
- Increased risk of adverse long-term effects of child sexual abuse but ..

Abuse is not destiny

Critical evaluation of research findings

- Research rigour
  - Consistent patterns and measures – systematic reviews and meta-analyses
  - Both quantitative and qualitative studies and ‘stories’
  - Peer review and journal quality – though not foolproof
- The boundary between research and advocacy
  - Room for an emotional response but not driven by it
- Understanding the implications for policy and practice
- Keeping in mind
  - Historical context
  - Cultural context
  - Other confounding factors – ‘multiple pathways’
Practice implications

- Critical importance of properly evaluated treatments and interventions
- Providing support and appropriate treatment
  - Not alone!
  - Can re-evaluate self-blame, guilt and helplessness
- “No wrong door”
- Rural and regional access

What don’t we know

- What is the effect of criminal prosecutions on survivors?
  - Do those who decide to report and engage in criminal proceedings fare better or worse? Depending on?
- What is the impact of media coverage?
- What is/will be the effect of the Royal Commission on survivors?
  - Do those who decide to engage with the Commission fare better or worse as a result? Depending on?
- The evidence base for what works in treatment?
Physical health problems

- **Range of physical health problems**
  - Complex links involving behavioural, emotional, social and cognitive factors
    - Especially affecting health-promoting behaviours
    - Affecting neuro-endocrine and immunological systems
  - Reduced life expectancy


Criminal prosecutions - difficulties

- Being able to tell ‘story’ – own voice
- Adversarial cross-examination
- Attack on credibility – twisted defence narrative in legal fictions – “peripheral becomes central” *
- Misunderstandings and exploitation of myths re delayed disclosure and continued relationship
- Lack of judicial intervention
- Problem of separate trials
- Multitude of warnings in directions to jury

* Carolyn Taylor (2004) *Court-licensed abuse …*
### Consequences: Experience in the criminal justice system

- Being believed?
- An equal playing field??
- Being adequately prepared for court?
- Conviction / acquittal / aborted trial
- Betrayal of trust
- Treatment by police
- Treatment by prosecution lawyers and ODPP
- Treatment by defence lawyers